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## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐

Declaration  
Submitted  
with Initial Filing

OR

☒

Declaration  
Submitted after  
Initial Filing

Attorney Docket  
Number

C 2944 PCT/US

First Named  
Inventor

MUELLER, Heinz

### COMPLETE IF KNOWN

Application Number

10/595,083

Filing Date

February 3, 2006

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**USE OF ETHOXYLATED AMIDOAMINES AS EMULSIFIERS IN DRILLING FLUIDS**

(Title of the Invention)

the specification of which

☐

is attached hereto

OR

☒

was filed on (MM/DD/YYYY)

10/14/2005

as United States Application Number or PCT International

Application Number

PCT/EP2005/011071

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority		Certified Copy Attached?	
			Not Claimed	YES	NO	
102004051280.9	Germany	10/21/2004	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☐

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Type a plus sign (+) inside this box ☐

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**DECLARATION****Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP2005/011071	10/14/2005	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Firm Name **23657** Customer Number or label ☐

☐ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number or label **23657** OR ☐ Fill in correspondence address below

Name					
Address					
Address					
City		State		Zip	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	<b>Heinz</b>	Middle Initial		Family Name	<b>MUELLER</b>	Suffix e.g. Jr.	
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Inventor's Signature		Date	<b>20.02.2006</b>
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Residence: City	<b>Monheim</b>	State		Country	<b>Germany</b>	Citizenship	<b>German</b>
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Post Office Address	<b>Sperberstrasse 5</b>
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Post Office Address	
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City	<b>40789 Monheim</b>	State		Zip		Country	<b>Germany</b>	Applicant Authority	
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☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box ☐

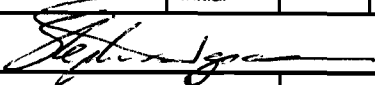
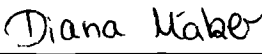
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**SIGN  
DATE**

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Jens	Middle Initial		Family Name	HARTMANN	Suffix e.g. Jr.	
Inventor's Signature	<i>Jens H.L.</i>			Date	March 07, 2006		
Residence: City	Bidnija	State		Country	Malta	Citizenship	German
Post Office Address	Park Lodge Nr. 2, Bidnija Road						
Post Office Address							
City	MST 13, Bidnija	State		Zip		Country	Malta
						Applicant Authority	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Stephan	Middle Initial		Family Name	von TAPAVICZA	Suffix e.g. Jr.	
Inventor's Signature	<i>Stephan</i>			Date	Feb 22, 2006		
Residence: City	Erkrath	State		Country	Germany	Citizenship	German
Post Office Address	Thomas-Mann-Strasse 12						
Post Office Address							
City	40699 Erkrath	State		Zip		Country	Germany
						Applicant Authority	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Diana	Middle Initial		Family Name	MAEKER	Suffix e.g. Jr.	
Inventor's Signature	<i>Diana Maeker</i>			Date	20.02.2006		
Residence: City	Monheim	State		Country	Germany	Citizenship	German
Post Office Address	Brandenburgerallee 8A						
Post Office Address							
City	40789 Monheim	State		Zip		Country	Germany
						Applicant Authority	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
City		State		Zip		Country	
						Applicant Authority	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

Type a plus sign (+) inside this box → ☐

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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Jens			Middle Initial			Family Name	HARTMANN			Suffix e.g. Jr.		
Inventor's Signature							Date						
Residence: City	Bidnija			State			Country	Malta			Citizenship	German	
Post Office Address	Park Lodge Nr. 2, Bidnija Road												
Post Office Address													
City	MST 13, Bidnija			State			Zip			Country	Malta		
										Applicant Authority			
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Stephan			Middle Initial			Family Name	von TAPAVICZA			Suffix e.g. Jr.		
Inventor's Signature							Date	Feb 22, 2006					
Residence: City	Erkrath			State			Country	Germany			Citizenship	German	
Post Office Address	Thomas-Mann-Strasse 12												
Post Office Address													
City	40699 Erkrath			State			Zip			Country	Germany		
										Applicant Authority			
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Diana			Middle Initial			Family Name	MAEKER			Suffix e.g. Jr.		
Inventor's Signature							Date	20.02.2006					
Residence: City	Monheim			State			Country	Germany			Citizenship	German	
Post Office Address	Brandenburgerallee 8A												
Post Office Address													
City	40789 Monheim			State			Zip			Country	Germany		
										Applicant Authority			
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name				Middle Initial			Family Name				Suffix e.g. Jr.		
Inventor's Signature							Date						
Residence: City				State			Country				Citizenship		
Post Office Address													
Post Office Address													
City				State			Zip			Country			
										Applicant Authority			

☐ Additional inventors are being named on supplemental sheet(s) attached hereto